



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4929

<b>SERIAL NUMBER</b> 10/044,534	<b>FILING DATE</b> 01/10/2002 <b>RULE</b>	<b>CLASS</b> 536	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> 0975.1005-016
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**

Junming Le, Jackson Heights, NY;  
Jan Vilcek, New York, NY;  
Peter Daddona, Menlo Park, CA;  
John Ghayeb, Downingtown, PA;  
David Knight, Berwyn, PA;  
Scott Siegel, Westborough, MA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A DIV OF 09/927,703 08/10/2001  
WHICH IS A CON OF 09/756,398 01/08/2001  
WHICH IS A DIV OF 09/133,119 08/12/1998 PAT 6,277,969  
WHICH IS A DIV OF 08/570,674 12/11/1995 ABN  
WHICH IS A CIP OF 08/324,799 10/18/1994 PAT 5,698,195  
WHICH IS A CIP OF 08/192,102 02/04/1994 PAT 5,656,272  
AND A CIP OF 08/192,861 02/04/1994 PAT 5,919,452  
AND A CIP OF 08/192,093 02/04/1994 PAT 6,284,471  
WHICH IS A CIP OF 08/010,406 01/29/1993 ABN  
AND A CIP OF 08/013,413 02/02/1993 ABN  
WHICH IS A CIP OF 07/943,852 09/11/1992 ABN  
WHICH IS A CIP OF 07/853,606 03/18/1992 ABN  
WHICH IS A CIP OF 07/670,827 03/18/1991 ABN

*OK*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***NONE *MS***IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 04/01/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 37	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>MS</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

021005

**TITLE**

Methods of treating ankylosis with chimeric anti-TNF antibodies

**FILING FEE RECEIVED**

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )